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APPLICANTS

Lysaa Britt, Mouans-Sartoux, FRANCE;

Jean-Francois Maion, Espoo, FINLAND;
Ritva Siren, Helsinki, FINLAND;** CONTINUING DATA*No Data*** FOREIGN APPLICATIONS*No Data*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
Verified and Acknowledged	Met after Allowance Examiner's Signature _____ Initials _____		
STATE OR COUNTRY	SHEETS	TOTAL CLAIMS	INDEPENDENT CLAIMS
FRANCE	DRAWING 15	47	7

ADDRESS

22907
 BANNER & WITCOFF
 1001 G STREET, N W
 SUITE 1100
 WASHINGTON , DC
 20001

TITLE

System and method for service naming and related directory structure in a mobile data network

FILING FEE RECEIVED 1600	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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